

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 15, 2002 8:00 am
Secretary of State

03-15-2002 90013 036 ***150.00

RECEIVED AT

DOCUMENT # M11773

1. Entity Name

PARADIES - FT. LAUDERDALE, INC.

Principal Place of Business

FORT LAUDERDALE INTERNATIONAL AIRPORT
 100 TERMINAL DRIVE ROOM 1020
 FORT LAUDERDALE FL 33315
 US

Mailing Address

5950 FULTON INDUSTRIAL BLV SW
 P O BOX 43485
 ATLANTA GA 30336

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2468758

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND RD.
 PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	DELETE <input type="checkbox"/> Delete
NAME	RUFFIN, JOHN
STREET ADDRESS	2330 UNIVERSITY DRIVE
CITY-ST-ZIP	CORAL SPRINGS FL 33067
TITLE	VP <input type="checkbox"/> Delete
NAME	MARCK, DON
STREET ADDRESS	5950 FULTON INDUSTRIAL BLVD SW
CITY-ST-ZIP	ATLANTA GA 30336
TITLE	D <input type="checkbox"/> Delete
NAME	BUNTROCK, ELIZABETH
STREET ADDRESS	521 EAST LAS OLAS BLVD.
CITY-ST-ZIP	FT. LAUDERDALE FL
TITLE	VSD <input type="checkbox"/> Delete
NAME	PARADIES, JIM
STREET ADDRESS	5950 FULTON INDUSTRIAL
CITY-ST-ZIP	ATLANTA GA 30336
TITLE	VD <input type="checkbox"/> Delete
NAME	DICKSON, RICHARD
STREET ADDRESS	5950 FULTON INDUSTRIAL
CITY-ST-ZIP	ATLANTA GA
TITLE	D <input type="checkbox"/> Delete
NAME	BOTTINO, LOU
STREET ADDRESS	5950 FULTON IND BLVD
CITY-ST-ZIP	ATLANTA GA

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-4-02

404-344-7905

CR2E034 (9/01)